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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/884,478	06/20/2001	Peter T. Bianco	731260-12	9571
21967 7590 05/21/2007 HUNTON & WILLIAMS LLP INTELLECTUAL PROPERTY DEPARTMENT 1900 K STREET, N.W. SUITE 1200 WASHINGTON, DC 20006-1109			EXAMINER GLASS, RUSSELL S	
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary	Application No.	Applicant(s)	
	09/884,478	BIANCO ET AL.	
	Examiner	Art Unit	
	Russell S. Glass	3626	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
 - If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
 - Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133).
- Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 20 February 2007.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-48 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-48 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
 Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
 Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).
- * See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|--|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413)
Paper No(s)/Mail Date. _____ |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | 5) <input type="checkbox"/> Notice of Informal Patent Application (PTO-152) |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)
Paper No(s)/Mail Date _____ | 6) <input type="checkbox"/> Other: _____ |

DETAILED ACTION

Notice to Applicant

1. This action is a first office action on the merits in response to the RCE filed on February 20, 2007.

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

2. **Claims 1-13, 15-19, 25-39, and 41-46 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao, (U.S. Pub. 2001/0032099) in view of Soll et al., (U.S. Pub. 2003/0055679).**

3. As per claim 1, the collective system of Joao and Soll disclose an electronic patient healthcare system for guiding a patient along a treatment pathway, related to a medical event, by educating and preparing the patient for the medical event and post-event recovery (Soll, Abstract, ¶¶ 64, 174-183), comprising:

(a) a healthcare information provider system including a storage device and electronically displayable files containing health information associated with the medical event and retrievably stored on said storage device, the storage device further including a registered patient database for storing information regarding patients being guided by

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the electronic patient healthcare system and a registered practitioner database for storing information regarding practitioners treating the patients being guided by the electronic patient healthcare system (Joao, ¶¶ 23, 66, 69, 120, 123, 150); and

(b) a patient terminal device in electronic communication with said healthcare information provider system and including an input device and a display device adapted to display said electronically displayable files (Joao, Fig. 1, ¶¶ 134-135, 137, 139);

said electronically displayable files include at least one pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event, and at least one post-event set of electronically displayable files containing health information for preparing and educating the patient for post-event recovery so as to guide the patient along the treatment pathway, (Soll, Abstract, ¶¶ 64, 65, 97, 174-183),

at least one of the pre-event and post-event sets of files including a task file that instructs the patient to perform a predetermined task, the predetermined task including at least two of scheduling an appointment with a medical professional, purchasing a medical product, taking a medical quiz, and evaluating at least one of a medical practitioner and a medical service facility (Soll, ¶¶ 174-183)(post-event files used to instruct patient to evaluate the medical practitioner and to schedule an appointment); and,

both (1) the at least one pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and (2) the at least one post-event set of electronically displayable files are pre-

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determined such that the files are stored in the healthcare information provider system in anticipation of the event and prior to the event, and such that the files are related so as to provide a treatment pathway, (Soll, ¶¶ 64, 65) (disclosing pre-event files for priming a patient, and post-event files for exit interviews, both of which are related so as to provide a treatment pathway).

As referenced above, Joao discloses an electronic patient healthcare system comprising a storage device and a patient terminal device, with input and display capabilities, for storing and processing patient and doctor information. Joao fails to disclose a system for guiding a patient along a treatment pathway, related to a medical event, by educating and preparing the patient for the medical event and post-event recovery. However, such a system is well known in the art as shown above by reference to Soll.

It would be obvious to one of ordinary skill in the art to combine Joao and Soll. The motivation would be to improve health care delivery to patients and better manage the process of providing health care, such system also providing high-quality health care at lower costs, (Soll, Abstract).

4. As per claim 2, the collective system of Joao and Soll disclose the system of claim 1. However, Soll further discloses a system wherein said electronically displayable files include a single electronically displayable file including a treatment pathway timeline display, comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information thereby graphically representing the treatment pathway (Soll, Abstract, ¶¶ 64, 65, 97, 156-159, 174-

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183)(The dynamic, problem-oriented CPM record to be accessed under each problem heading by date is considered to be analogous to a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

5. As per claim 3, the collective system of Joao and Soll disclose the system of claim 2. Joao and Soll further disclose a system wherein each of said plurality of time-sequenced phase images include at least one electronic link to one of the pre-event set of files and the post-event set of files (Soll, ¶¶ 156, 157), and the patient can access the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image (Joao, ¶¶ 23, 24).

Soll discloses a system wherein medical information is organized and accessible by problem. The data for each problem is then organized by date under the headings in table 5. For example, data category 7, Diagnostic and Treatment Plans, contains the organized by date into Initial Plans, Updated Plans, and Management Milestones. This system is considered to be analogous to the plurality of time-sequenced phase images including at least one electronic link to one of the pre-event set of files and the post-event set of files. Soll fails to disclose that the patients can access the files in the same interactive manner as the health care providers. However, Joao discloses a system wherein the patients can utilize the system in the same manner as providers.

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The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

6. As per claim 4, the collective system of Joao and Soll disclose the system of claim 1. Soll further discloses a system wherein the task file includes a patient confirmation subfile that requires the patient to interactively confirm completion of the predetermined task using the input device of the patient terminal device and communicate the confirmation with the healthcare information provider system, (Soll, ¶ 181-183)(The exit interview interactively conducted on a CPM patient carrel is considered to be a patient confirmation subfile that requires the patient to interactively confirm completion of the predetermined task using the input device of the patient terminal device. The reference further teaches using a home terminal to check the patient's health and instruct patients to seek prompt attention, after which a notification is sent to the doctor.).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

7. As per claim 5, the collective system of Joao and Soll disclose the system of claim 1. Joao further discloses a system wherein at least one of the pre-event and post-event sets of files includes a calendar file that displays a schedule of time specific events associated with the treatment pathway, said calendar file adapted to be modified by the patient using the input device of the patient terminal device, (Joao, ¶ 148, 150, 152, 266-270)(an appointment schedule is considered to be analogous to a calendar file that displays a schedule of time specific events associated with the treatment pathway).

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The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

8. As per claim 6, the collective system of Joao and Soll disclose the system of claim 1. Joao further discloses a system further including an electronically displayable duplicate account file containing input fields for receiving account information relating to an authorized user to create a duplicate account for permitting the authorized user to access and modify the patient's treatment pathway, (Joao, ¶¶ 24-28)(a user, payer and/or intermediary utilizing the system in the same or similar manner as a patient or provider is analogous to an authorized user with a duplicate account for access and modification).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

9. As per claim 7, the collective system of Joao and Soll disclose the system of claim 1. Soll further discloses a system wherein each of a patient's time-sequenced phase images is adapted to be modified by a medical practitioner treating the patient being guided by the electronic patient healthcare system, (Soll, ¶¶ 156-162)(the dynamic, problem oriented CPM record is considered to be analogous to a patient's time-sequenced phase images).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

10. As per claim 8, the collective system of Joao and Soll disclose a system for displaying health information capable of guiding a patient along a treatment pathway,

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related to a medical event, by educating and preparing the patient for the medical event and post-event recovery (Soll, Abstract, ¶¶ 64, 65, 97, 174-183), comprising:

- (a) a healthcare information provider system including a storage device and electronically displayable files containing health information associated with the medical event and retrievably stored on said storage device (Joao, ¶¶ 23, 66, 69, 120, 123); and
- (b) a patient terminal device including an input device and a display device adapted to display said electronically displayable files (Joao, Fig. 1, ¶¶ 134-135, 137, 139);

wherein said electronically displayable files include a single electronically displayable file including a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information, each of said time-sequenced phase images providing access to a pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and a post-event set of electronically displayable files containing health information for preparing and educating the patient for post-event recovery so as to guide the patient along the treatment pathway, the treatment pathway timeline display graphically and contemporaneously displaying, to the patient, at least three phases and associated tasks for each of three phases, the at least three phases graphically representing segments of the treatment pathway (Soll, Abstract, ¶¶ 64, 65, 97, 157, 159, 174-183)(organizing information to be accessed under each heading by date is considered to be analogous to including a treatment pathway timeline display comprising a plurality of time-sequenced phase images

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corresponding to time-sequenced phases of health information with at least three phases and associated tasks for each of three phases); and,

both (1) the at least one pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and (2) the at least one post-event set of electronically displayable files are pre-determined such that the files are stored in the healthcare information provider system in anticipation of the event and prior to the event, and such that the files are related so as to provide a treatment pathway, the files being associated with each other as being part of the treatment pathway and linked to the treatment pathway timeline display (Soll, ¶¶ 64, 65) (disclosing pre-event files for priming a patient, and post-event files for exit interviews, both of which are related and associated so as to provide a treatment pathway).

As referenced above, Joao discloses an electronic patient healthcare system comprising a storage device and a patient terminal device, with input and display capabilities, for storing and processing patient and doctor information. Joao fails to disclose guiding a patient along a treatment pathway. However, such a system is well known in the art as shown above by reference to Soll.

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

11. As per claim 9, the collective system of Joao and Soll disclose the system of claim 8, and further disclose a system wherein each of said plurality of time-sequenced phase images include at least one electronic link to one of the pre-event set of files and

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the post-event set of files, and the patient can access the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image, at least one of said at least three phases being associated with a file in the pre-event set of electronically displayable files; and at least one of said at least three phases being associated with a file in the post-event set of electronically displayable files (Soll, Abstract, ¶¶ 157, 159, 181-183, 184-190)(interacting with information organized under each heading by date is considered to be analogous to accessing and viewing the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image and being associated with pre-event and post-event files)(see also Joao, ¶ 24 regarding patient use same as provider use).

As referenced above, Joao discloses generating and outputting medical records for pre-treatment and post-treatment information. Soll fails to disclose providing for the patient to view and access the records in the same interactive manner as a health care provider. However, this feature is taught by the above reference to Joao. Joao fails to disclose a method for guiding a patient along a treatment pathway associated with a medical event by providing health information to educate and prepare the patient, wherein the user views the treatment pathway timeline display and access the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image. However such method is well known in the art as evidenced above by reference to Soll.

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

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12. As per claim 10, the collective system of Joao and Soll disclose the system of claim 8. Soll further discloses a system wherein at least one of the pre-event and post-event sets of files includes a task file that instructs the patient to perform a predetermined task, (Soll, ¶ 181-183)(The exit interview is considered to be a post-event task file).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

13. As per claim 11, the collective system of Joao and Soll disclose the system of claim 8. Soll further discloses a system wherein the predetermined task includes at least three of reading a medical information file, taking medication, scheduling an appointment with a medical professional, purchasing a medical product, taking a medical quiz, and evaluating at least one of a medical practitioner and a medical service facility, (Soll, ¶¶ 174-190)(pre-determined tasks include evaluating the medical practitioner, scheduling an appointment, and taking a medical quiz using the revisit strategy file or the exit interview file).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

14. As per claim 12, the collective system of Joao and Soll disclose the system of claim 8. Soll further discloses a system wherein the predetermined task includes at least two of scheduling an appointment with a medical professional, purchasing a medical product, taking a medical quiz, and evaluating at least one of a medical

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practitioner and a medical service facility, (Soll, ¶¶ 174-183)(predetermined tasks include evaluating the medical practitioner and to scheduling an appointment).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

15. As per claim 13, the collective system of Joao and Soll disclose a method for guiding a patient along a treatment pathway associated with a medical event by providing health information to educate and prepare the patient for the medical event and post-event recovery, (Soll, Abstract, ¶¶ 64, 65, 97, 174-183), comprising the steps of:

- (a) generating, based on the medical event of the patient, at least one pre-event set of electronically displayable files containing health information, and at least one post-event set of electronically displayable files containing health information, (Joao, Abstract, ¶ 135, 152)(see also Soll, 62, 64, 174);
- (b) displaying a single electronically displayable file including a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information to illustrate the treatment pathway, each of said time-sequenced phase images providing access to at least one of a pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and a post-event set of electronically displayable files containing health information for preparing and educating the patient for post-event recovery so as to guide the patient along the treatment pathway, (Soll, Abstract, Fig. 2 ¶¶ 64, 65, 80, 97, 157, 159, 174-183)(displaying information to be

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accessed under each heading by date is considered to be analogous to including a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information)(see also Joao, Fig. 3 regarding the display step); and

(c) permitting the patient to view the treatment pathway timeline display and access the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image, (Soll, Abstract, ¶¶ 157, 159, 181, 184-190)(accessing information under each heading by date is considered to be analogous to accessing the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image)(see also Joao, ¶ 19, 24 regarding patient access); and,

both (1) the at least one pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and (2) the at least one post-event set of electronically displayable files are pre-determined such that the files are stored in the healthcare information provider system in anticipation of the event and prior to the event, and such that the files are related so as to provide a treatment pathway, (Soll, ¶ 64, 65) (disclosing pre-event files for priming a patient, and post-event files for exit interviews, both of which are related so as to provide a treatment pathway).

Joao discloses a system that can be utilized by any patient or provider in the same manner. Joao fails to disclose a method for guiding a patient along a treatment pathway associated with a medical event by providing health information to educate and

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prepare the patient, wherein the patient views the treatment pathway timeline display and access the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image. However such method is well known in the art as evidenced above by reference to Soll.

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

16. As per claim 15, the collective system of Joao and Soll disclose the method of claim 13. Soll further discloses a method wherein at least one of the pre-event and post-event sets of files includes a task file that instructs the patient to perform a predetermined task, (Soll, ¶¶ 174-183)(predetermined tasks include evaluating the medical practitioner and to scheduling an appointment).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

17. As per claim 16, the collective system of Joao and Soll disclose the method of claim 15. Soll further discloses a method wherein the predetermined task includes at least three of reading a medical information file, taking medication, scheduling an appointment with a medical professional, purchasing a medical product, taking a medical quiz, and evaluating at least one of a medical practitioner and a medical service facility, (Soll, ¶¶ 174-190)(pre-determined tasks include evaluating the medical

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practitioner, scheduling an appointment, and taking a medical quiz using the revisit strategy file or the exit interview file).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

18. As per claim 17, the collective system of Joao and Soll disclose the method of claim 13. Joao further discloses a method wherein at least one of the pre-event and post-event sets of files includes a calendar file that displays a schedule of time specific events associated with the treatment pathway, said calendar file adapted to be modified by the patient using the input device of the patient terminal device, (Joao, ¶¶ 148, 150, 152, 266-270)(an appointment schedule is considered to be analogous to a calendar file that displays a schedule of time specific events associated with the treatment pathway).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

19. As per claim 18, the collective system of Joao and Soll disclose the method of claim 13. Joao further discloses a method further including the step of providing an electronically displayable duplicate account file containing input fields for receiving account information relating to an authorized user to create a duplicate account for permitting the authorized user to access and modify the patient's treatment pathway, (Joao, ¶¶ 24-28)(a user, payer and/or intermediary utilizing the system in the same or similar manner as a patient or provider is analogous to an authorized user with a duplicate account for access and modification).

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The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

20. As per claim 19, the collective system of Joao and Soll disclose an information storage media, comprising:

- (a) instructions for generating based on the medical event of the patient, at least one pre-event set of electronically displayable files containing health information (Joao, Abstract, ¶ 152), for preparing and educating the patient for the medical event, and at least one post-event set of electronically displayable files (Joao, ¶ 152), containing health information for preparing and educating the patient for post-event recovery (Soll, Abstract, Fig. 2 ¶¶ 64, 65, 80, 157, 159, 174-183)(displaying information to be accessed under each heading by date is considered to be analogous to including a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information);
- (b) instructions for displaying a single electronically displayable file (Joao, ¶ 23-24), including a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information to illustrate the treatment pathway, each of said time-sequenced phase images providing access to at least one of a pre-event set of electronically displayable files (Joao, ¶ 152), containing health information for preparing and educating the patient for the medical event and a post-event set of electronically displayable files (Joao, ¶ 152), containing health information for preparing and educating the patient for post-event recovery so as to guide the patient along the treatment pathway (Soll, Abstract, Fig. 2 ¶¶ 64, 65, 80, 97,

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157, 159, 174-183)(instructions for displaying information to be accessed under each heading by date is considered to be analogous to instructions for displaying a single electronically displayable file including a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information); and

(c) instructions for generating and displaying an access file for permitting the patient to view (Joao, ¶ 23-24), the treatment pathway timeline display and access the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image (Soll, Abstract, Fig. 2; ¶¶ 64, 65, 80, 157, 159, 174-183)(instructions for displaying and allowing information to be accessed under each heading by date is considered to be analogous to instructions for displaying and accessing the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image); and,

both (1) the at least one pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and (2) the at least one post-event set of electronically displayable files are pre-determined such that the files are stored in the healthcare information provider system in anticipation of the event and prior to the event, and such that the files are related so as to provide a treatment pathway, (Soll, ¶ 64, 65) (disclosing pre-event files for priming a patient, and post-event files for exit interviews, both of which are related so as to provide a treatment pathway).

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As referenced above, Joao discloses a system of generating, displaying, and allowing patient access to electronic medical files using instructions contained on information storage media. Joao also discloses pre-event and post-event electronically displayable files. Joao fails to disclose information for generating, displaying and accessing a treatment pathway timeline display, for preparing and educating the patient for the medical event, comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information. However, as evidenced by the above references to Soll, such information is well known in the art.

It would be obvious to one of ordinary skill in the art to combine Joao and Soll. The motivation would be to improve health care delivery to patients and better manage the process of providing health care, such system also providing high-quality health care at lower costs, (Soll, Abstract).

21. As per claim 25, the collective system of Joao and Soll disclose an electronic patient healthcare system for guiding a patient along a treatment pathway, related to a medical event, by educating and preparing the patient for the medical event and post-event recovery (Soll, Abstract, ¶¶ 64,174-183), comprising:

(a) a healthcare information provider system including a storage device and electronically displayable files containing health information associated with the medical event and retrievably stored on said storage device, the storage device further including a registered patient database for storing information regarding patients being guided by the electronic patient healthcare system and a practitioner database for storing

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information regarding practitioners treating the patients being guided by the electronic patient healthcare system (Joao, ¶¶ 23, 66, 69, 120, 123, 147, 148, 150); and

(b) the healthcare information provider system being interfaceable with a patient device, the patient device providing an input device and a display device for interfacing with the patient, the healthcare information provider system providing electronically displayable files to the patient device (Joao, Fig. 1, ¶¶ 134-135, 137, 139, 141, 142);

wherein said electronically displayable files include at least one pre-event set of electronically displayable files, and at least one post-event set of electronically displayable files (Joao, ¶ 152).

The pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event (Soll, Abstract, ¶¶ 62, 64, 65, 97), and

The post-event set of electronically displayable files containing health information for preparing and educating the patient for post-event recovery so as to guide the patient along the treatment pathway, (Soll, Abstract, ¶¶ 174-183)

wherein at least one of the pre-event and post-event sets of files including a task file that instructs the patient to perform a predetermined task (Soll, ¶¶ 174-183); and,

both (1) the at least one pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and (2) the at least one post-event set of electronically displayable files are predetermined such that the files are stored in the healthcare information provider system in anticipation of the event and prior to the event, and such that the files are related so

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as to provide a treatment pathway, (Soll, ¶¶ 64, 65) (disclosing pre-event files for priming a patient, and post-event files for exit interviews, both of which are related so as to provide a treatment pathway).

As referenced above, Joao discloses an electronic patient healthcare system comprising a storage device and an interfaceable patient terminal device, with input and display capabilities, for storing and processing patient and doctor information. Joao fails to disclose a system for guiding a patient along a treatment pathway, related to a medical event, by educating and preparing the patient for the medical event and post-event recovery. However, such a system is well known in the art as shown above by reference to Soll.

It would be obvious to one of ordinary skill in the art to combine Joao and Soll. The motivation would be to improve health care delivery to patients and better manage the process of providing health care, such system also providing high-quality health care at lower costs, (Soll, Abstract).

22. As per claim 26, the collective system of Joao and Soll disclose the system of claim 25, wherein the predetermined task including at least two of scheduling an appointment with a medical professional, purchasing a medical product, taking a medical quiz, and evaluating at least one of a medical practitioner and a medical service facility (Soll, ¶¶ 174-183)(post-event files instruct patient to evaluate the medical practitioner and to schedule an appointment).

As referenced above, Joao discloses an electronic patient healthcare system comprising a storage device and a patient terminal device, with input and display

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capabilities, for storing and processing patient and doctor information. Joao fails to disclose a system wherein the patient is instructed to complete the predetermined task including at least two of: scheduling an appointment with a medical professional, purchasing a medical product, taking a medical quiz, and evaluating at least one of a medical practitioner and a medical service facility. However, such a system is well known in the art as shown above by reference to Soll.

It would be obvious to one of ordinary skill in the art to combine Joao and Soll. The motivation would be to improve health care delivery to patients and better manage the process of providing health care, such system also providing high-quality health care at lower costs, (Soll, Abstract).

23. As per claim 27, the collective system of Joao and Soll disclose the system of claim 25. However, Soll further discloses a system wherein said electronically displayable files include a single electronically displayable file including a treatment pathway timeline display, comprising a plurality of time-sequenced phase content corresponding to time-sequenced phases of health information thereby illustrating the treatment pathway (Soll, Abstract, ¶¶ 64, 65, 97, 156-159, 174-183)(The dynamic, problem-oriented CPM record to be accessed under each problem heading by date is considered to be analogous to a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

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24. As per claim 28, the collective system of Joao and Soll disclose the system of claim 27. Soll further discloses a system wherein each of a patient's time-sequenced phase content is adapted to be modified by a medical practitioner treating the patient being guided by the electronic patient healthcare system, (Soll, ¶ 156-162)(the dynamic, problem oriented CPM record is considered to be analogous to a patient's time-sequenced phase images).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

25. As per claim 29, the collective system of Joao and Soll disclose the system of claim 25, wherein the patient device is at least one of a personal computer, a dumb terminal, a thin client, a hand-held device and a wireless phone, (Joao, ¶ 17, 21, 23)(Soll, Fig. 2; ¶ 76).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

26. As per claim 30, the collective system of Joao and Soll disclose a system for displaying health information capable of guiding a patient along a treatment pathway, related to a medical event, by educating and preparing the patient for the medical event and post-event recovery (Soll, Abstract, ¶¶ 64, 65, 97, 174-183), comprising:

(a) a healthcare information provider system including a storage device and electronically displayable files containing health information associated with the medical event and retrievably stored on said storage device (Joao, ¶¶ 23, 66, 69, 120, 123); and

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(b) the healthcare information provider system interfaceable with a patient terminal device, the patient terminal device including an input device and a display device adapted to display said electronically displayable files (Joao, Fig. 1, ¶¶ 134-135, 137, 139, 141, 142);

(c) wherein said electronically displayable files include a single electronically displayable file including a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information, each of said time-sequenced phase images providing access to at least one of (Soll, Abstract, ¶¶ 157, 159)(organizing information to be accessed under each heading by date is considered to be analogous to including a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information):

(d) a pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event (Soll, Abstract, ¶¶ 64, 65, 97), and

(e) a post-event set of electronically displayable files containing health information for preparing and educating the patient for post-event recovery so as to guide the patient along the treatment pathway (Soll, Abstract, ¶¶ 174-183); and,

both (1) the at least one pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and (2) the at least one post-event set of electronically displayable files are pre-determined such that the files are stored in the healthcare information provider system

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in anticipation of the event and prior to the event, and such that the files are related so as to provide a treatment pathway, (Soll, ¶¶ 64, 65) (disclosing pre-event files for priming a patient, and post-event files for exit interviews, both of which are related so as to provide a treatment pathway).

As referenced above, Joao discloses an electronic patient healthcare system comprising a storage device and a patient terminal device, with input and display capabilities, for storing and processing patient and doctor information. Joao fails to disclose a system for guiding a patient along a treatment pathway, related to a medical event, by educating and preparing the patient for the medical event and post-event recovery. However, such a system is well known in the art as shown above by reference to Soll.

It would be obvious to one of ordinary skill in the art to combine Joao and Soll. The motivation would be to improve health care delivery to patients and better manage the process of providing health care, such system also providing high-quality health care at lower costs, (Soll, Abstract).

27. As per claim 31, the collective system of Joao and Soll disclose the system of claim 30. Joao and Soll further disclose a system wherein each of said plurality of time-sequenced phase images include at least one electronic link to one of the pre-event set of files and the post-event set of files (Soll, ¶¶ 156, 157), and the system provides for the patient accessing the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image (Joao, ¶¶ 23, 24).

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Soll discloses a system wherein medical information is organized and accessible by problem. The data for each problem is then organized by date under the headings in table 5. For example, data category 7 "Diagnostic and Treatment Plans" contains the organized by date into Initial Plans, Updated Plans, and Management Milestones. This system is considered to be analogous to the plurality of time-sequenced phase images including at least one electronic link to one of the pre-event set of files and the post-event set of files. Soll fails to disclose that the patients can access the files in the same interactive manner as the health care providers. However, Joao discloses a system wherein the patients can utilize the system in the same manner as providers.

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

28. As per claim 32, the collective system of Joao and Soll disclose the system of claim 31. Soll further discloses a system wherein at least one of the pre-event and post-event sets of files includes a task file that instructs the patient to perform a predetermined task, (Soll, ¶ 181-183)(The exit interview is considered to be a post-event task file).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

29. As per claim 33, the collective system of Joao and Soll disclose the system of claim 30. Joao further discloses a system wherein the healthcare information provider system is interfaceable with a medical practitioner terminal device, the medical practitioner terminal device for interfacing with a medical practitioner, and

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the healthcare information provider system inputting inquiries from and outputting patient monitoring information to the medical practitioner device, in response to the inquiries, (Joao, ¶ 15, 27-41, 132).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

30. As per claim 34, the collective system of Joao and Soll disclose the system of claim 30. Joao further discloses a system wherein the storage device includes:

a patient database storing data about a patient accessing the healthcare information provider system, and

a registered practitioner database for storing information regarding practitioners treating the patients being guided by the electronic patient healthcare system (Joao, ¶¶ 23, 66, 69, 120, 123, 150).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

31. As per claim 35, the collective system of Joao and Soll disclose the system of claim 30. Joao further discloses a system wherein the storage device includes:

a calendar file that displays a schedule of time specific events associated with the treatment pathway, the calendar file adapted to be modified by the patient, (Joao, ¶ 148, 150, 152, 266-270)(an appointment schedule is considered to be analogous to a calendar file that displays a schedule of time specific events associated with the treatment pathway).

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The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

32. As per claim 36, the collective system of Joao and Soll disclose the system of claim 30. Joao and Soll further discloses a system wherein the healthcare information provider system provides for the patient to access health information associated with a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image through the patient terminal device. (Soll, Abstract, ¶¶ 157, 159, 181, 184-190)(accessing information under each heading by date is considered to be analogous to accessing the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image)(see also Joao, ¶ 19, 24 regarding patient access).

Joao discloses a system that can be utilized by any patient or provider in the same manner. Joao fails to disclose a method for guiding a patient along a treatment pathway associated with a medical event by providing health information to educate and prepare the patient, wherein the patient views the treatment pathway timeline display and access the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image. However such method is well known in the art as evidenced above by reference to Soll.

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

33. As per claim 37, the collective system of Joao and Soll disclose the system of claim 36. Soll further discloses a system wherein the healthcare information provider

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system provides for the time-sequenced phase images, associated with a particular patient, to be modified by a registered practitioner who is associated with the particular patient, (Soll, ¶ 156-162)(the dynamic, problem oriented CPM record is considered to be analogous to a patient's time-sequenced phase images).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

34. As per claim 38, the collective system of Joao and Soll disclose the system of claim 36. Soll and Joao further discloses a system wherein the healthcare information provider system provides for the time-sequenced phase images, associated with a particular patient, to be modified by a person who is associated with the particular patient, (Soll, ¶ 156-162) (Joao, ¶ 24-28).

Soll discloses the dynamic, problem oriented CPM record that can be modified by a physician and is considered to be analogous to a patient's time-sequenced phase images. Joao discloses a system allowing a user, payer and/or intermediary to utilize the system in the same or similar manner as a patient or provider. This flexibility would allow any person associated with a patient to modify the time-sequenced phase images in the same manner as their physician.

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

35. As per claim 39, the collective system of Joao and Soll disclose a system for guiding a patient along a treatment pathway associated with a medical event by

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providing health information to educate and prepare the patient for the medical event and post-event recovery, (Soll, Abstract, ¶¶ 64, 65, 96, 97, 174-183), comprising:

(a) means for generating, based on the medical event of the patient, at least one pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event, and at least one post-event set of electronically displayable files containing health information for preparing and educating the patient for post-event recovery, (Joao, Abstract, ¶ 135, 152)(see also Soll, Abstract, ¶¶ 64, 65, 96, 97, 174-183);

(b) means for outputting, to a patient terminal device, a single electronically displayable file including a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information to illustrate the treatment pathway, each of said time-sequenced phase images providing access to at least one of a pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and a post-event set of electronically displayable files containing health information for preparing and educating the patient for post-event recovery so as to guide the patient along the treatment pathway, (Soll, Abstract, Fig. 2 ¶¶ 64, 65, 80, 96, 97, 157, 159, 174-183)(displaying information to be accessed under each heading by date is considered to be analogous to including a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information)(see also Joao, ¶152; Fig. 3 regarding the display step); and

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(c) means for providing for the patient to view the treatment pathway timeline display and access the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image, (Soll, Abstract, ¶¶ 157, 159, 181-183, 184-190)(interacting with information organized under each heading by date is considered to be analogous to accessing and viewing the health information of a particular time-sequenced phase by interacting with the corresponding time-sequenced phase image)(see also Joao, ¶ 24 regarding patient use same as provider use), and

both (1) the at least one pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and (2) the at least one post-event set of electronically displayable files are pre-determined such that the files are stored in the healthcare information provider system in anticipation of the event and prior to the event, and such that the files are related so as to provide a treatment pathway, (Soll, ¶¶ 64, 65) (disclosing pre-event files for priming a patient, and post-event files for exit interviews, both of which are related so as to provide a treatment pathway).

As referenced above, Joao discloses generating and outputting medical records for pre-treatment and post-treatment information, and providing for the patient to view and access the records in the same interactive manner as a health care provider. Joao fails to disclose a system for guiding a patient along a treatment pathway associated with a medical event by providing health information to educate and prepare the patient, wherein the patient views the treatment pathway timeline display and access the health information of a particular time-sequenced phase by interacting with the corresponding

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time-sequenced phase image. However such a system is well known in the art as evidenced above by reference to Soll.

It would be obvious to one of ordinary skill in the art to combine Joao and Soll. The motivation would be to improve health care delivery to patients and better manage the process of providing health care, such system also providing high-quality health care at lower costs, (Soll, Abstract).

36. As per claim 41, the collective system of Joao and Soll disclose the system of claim 39. Soll further discloses a system wherein at least one of the pre-event and post-event sets of files includes a task file that instructs the patient to perform a predetermined task, (Soll, ¶¶ 174-183)(predetermined tasks include evaluating the medical practitioner and scheduling an appointment).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

37. As per claim 42, Joao and Soll disclose the system of claim 8. Soll further discloses a system wherein the medical event is one of an operation, treatment, testing, pregnancy and birth of a baby, (Soll, ¶176).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

38. As per claim 43, Joao and Soll disclose the system of claim 1. Soll further discloses a system wherein the medical event is one of an operation, treatment, testing, pregnancy and birth of a baby, (Soll, ¶176).

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The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

39. As per claim 44, the collective system of Joao and Soll disclose the system of claim 1. However, Soll further discloses a system wherein said electronically displayable files include a treatment pathway timeline display comprising a plurality of time-sequenced phase content, corresponding to time-sequenced phases of health information thereby illustrating the treatment pathway, (Soll, Abstract, ¶¶ 64, 65, 97, 156-159, 174-183)(The dynamic, problem-oriented CPM record to be accessed under each problem heading by date is considered to be analogous to a treatment pathway timeline display comprising a plurality of time-sequenced phase images corresponding to time-sequenced phases of health information).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

40. As per claim 45, the collective system of Joao and Soll disclose the system of claim 44. However, Soll further discloses a system wherein the time-sequenced phase images include at least one of text representation and graphical representation, (Soll, Abstract, ¶¶ 64, 65, 97, 156-159, 174-183).

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

41. As per claim 46, the collective system of Joao and Soll disclose the system of claim 2. However, Soll further discloses a system wherein the time-sequenced phase

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images include at least one of text representation and graphical representation, (Soll, Abstract, ¶¶ 64, 65, 97, 156-159, 174-183).

42. Claims 14, 20-24, 40, 47, and 48 are rejected under 35 U.S.C. 103(a) as being unpatentable over the collective system of Joao and Soll as applied to claims 13, 19, and 39 above, and further in view of Schoenburg et al., (U.S. 6,463,417).

43. As per claim 14, the collective system of Joao and Soll disclose the method of claim 13. However Joao and Soll fail to clearly disclose a method further including the steps of providing the patient with a medical practitioner code designating the medical practitioner conducting the medical event and requiring the patient to input the medical practitioner code into an electronically displayable file containing a code input field and transmitting the code to the healthcare information provider system.

Schoenburg discloses a method including the steps of providing the patient with a medical practitioner code designating the medical practitioner conducting the medical event and requiring the patient to input the medical practitioner code into an electronically displayable file containing a code input field and transmitting the code to the healthcare information provider system, (Schoenburg, Abstract, Fig. 2, Col. 3, lines 20-52; Col. 4, line 52 through Col. 5, line 40).

It would be obvious to one of ordinary skill in the art to combine Schoenburg into the collective system of Joao and Soll. The motivation would be to provide a method of and system for distributing medical information in which the medical provider has quick access to a patient's medical record, but only to the information in the medical record

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that is necessary for the proper treatment of the patient at that time, (Schoenburg, Col. 2, lines 16-22).

44. As per claim 20, the collective system of Joao and Soll disclose the information storage media of claim 19, including instructions providing an electronically displayable file, (Soll, ¶ 76, 77). However Joao and Soll fail to clearly disclose a system further containing a code input field for receiving a medical practitioner code and transmitting the code to the healthcare information provider system.

Schoenburg discloses a system including instructions providing an electronically displayable file containing a code input field for receiving a medical practitioner code and transmitting the code to the healthcare information provider system, (Schoenburg, Abstract, Fig. 2, Col. 3, lines 20-52; Col. 4, line 52 through Col. 5, line 40).

The obviousness and motivation to combine Schoenburg with the collective system of Joao and Soll is as provide in the rejection of claim 14 and incorporated herein by reference.

45. As per claim 21, the collective system of Joao, Soll, and Schoenburg disclose the information storage media of claim 20. Soll further discloses a system wherein at least one of the pre-event and post-event sets of files includes a task file that instructs the patient to perform a predetermined task, (Soll, ¶ 76, 80, 82, 181-190)(pre-determined tasks include evaluating the medical practitioner, scheduling an appointment, and taking a medical quiz using the revisit strategy file or the exit interview file).

The obviousness and motivation to combine Joao, Soll, and Schoenburg are as provided in claims 1 and 14 above and incorporated herein by reference.

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46. As per claim 22, the collective system of Joao, Soll, and Schoenburg disclose the information storage media of claim 21. Soll further discloses a system wherein the predetermined task includes at least three of reading a medical information file, taking medication, scheduling an appointment with a medical professional, purchasing a medical product, taking a medical quiz, and evaluating at least one of a medical practitioner and a medical service facility, (Soll, ¶ 76, 80, 82, 181-190)(pre-determined tasks include evaluating the medical practitioner, scheduling an appointment, and taking a medical quiz using the revisit strategy file or the exit interview file).

The obviousness and motivation to combine Joao, Soll, and Schoenburg are as provided in claims 1 and 14 above and incorporated herein by reference.

47. As per claim 23, the collective system of Joao, Soll, and Schoenburg disclose the information storage media of claim 20. Joao further discloses a system wherein at least one of the pre-event and post-event sets of files includes a calendar file that displays a schedule of time specific events associated with the treatment pathway, said calendar file adapted to be modified by the patient using the input device of the patient terminal device, (Joao, ¶ 148, 150, 152, 266-270)(an appointment schedule is considered to be analogous to a calendar file that displays a schedule of time specific events associated with the treatment pathway).

The obviousness and motivation to combine Joao, Soll, and Schoenburg are as provided in claims 1 and 14 above and incorporated herein by reference.

48. As per claim 24, the collective system of Joao, Soll, and Schoenburg disclose the information storage media of claim 20. Joao discloses a system further including

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instructions for displaying an electronically displayable duplicate account file containing input fields for receiving account information relating to an authorized user to create a duplicate account for permitting the authorized user to access and modify the patient's treatment pathway, (Joao, ¶ 24-28, 145)(Soll, Fig. 12, ¶ 76, 80, 82, 181-183).

Joao discloses a user, payer and/or intermediary utilizing the system in the same or similar manner as a patient or provider that is analogous to an authorized user with a duplicate account for access and modification. Soll discloses an electronically displayable file with an input field for receiving a patient I.D. allowing for access and modification. The Patient I.D is considered to be analogous to account information relating to an authorized user. Both Joao and Soll disclose databases containing data and information to perform all disclosed functions.

The obviousness and motivation to combine Joao and Soll are as provided in claim 1 above and incorporated herein by reference.

49. As per claim 40, the collective system of Joao, Soll, and Schoenburg disclose the system of claim 39. However Joao and Soll fail to clearly disclose further disclose a method further including means for providing the patient with a medical practitioner code designating the medical practitioner conducting the medical event and the healthcare information provider system requiring input, from the patient, of the medical practitioner code.

Schoenburg discloses a method including the step of providing the patient with a medical practitioner code designating the medical practitioner conducting the medical event and the healthcare information provider system requiring input, from the patient,

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of the medical practitioner code, (Schoenburg, Abstract, Fig. 2, Col. 3, lines 20-52; Col. 4, line 52 through Col. 5, line 40).

The obviousness and motivation to combine Joao, Soll, and Schoenburg are as provided in the rejection claims 1 and 14 above and incorporated herein by reference.

50. As per claim 47, the collective system of Joao, Soll, and Schoenburg disclose the method of claim 14. Schoenburg further discloses a method including providing general content to a further user who does not utilize a code, (Schoenburg, Abstract, Fig. 2, Col. 3, lines 20-52; Col. 4, line 52 through Col. 5, line 40).

Although Schoenburg does not specifically describe providing general content to a further user who does not utilize a code, Schoenburg clearly discloses creating a heirarchical data access system wherein the amount and content of data available can be adjusted between different users depending upon the code provided.

In view of Schoenburg, it would be obvious to providing general content to a further user who does not utilize a code. The motivation would be to create a system of hierarchial data categorizing the individual's medical information into privacy levels ranging from least private to most private, (Schoenburg, Abstract).

51. As per claim 48, the collective system of Joao, Soll, and Schoenburg disclose the method of claim 47. Joao further discloses a method wherein the general content includes at least one of a physicians directory, a graphical diagnostic, and product links, (Joao, ¶ 150, 151, 153)(database containing a physician's directory and insurance products).

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The obviousness and motivation to combine Joao, Soll, and Schoenburg are as provided in the rejection claims 1 and 14 above and incorporated herein by reference.

Response to Arguments

Applicant's arguments filed August 7, 2006 have been fully considered but they are not persuasive for the following reasons:

1. As per Applicant's argument that Soll fails to disclose that both (1) the at least one pre-event set of electronically displayable files containing health information for preparing and educating the patient for the medical event and (2) the at least one post-event set of electronically displayable files are pre-determined such that the files are stored in the healthcare information provider system in anticipation of the event and prior to the event, and such that the files are related so as to provide a treatment pathway, it is submitted that Soll discloses both pre-event files for priming a patient, and post-event files for exit interviews, both of which are related so as to provide a treatment pathway, (Soll, ¶¶ 64, 65). Furthermore, Soll discloses a post-event set of electronically displayable files that are **predetermined** and **related** via search software and hot keys which are then linked to ICD-9 codes, (Soll, ¶ 162)(linked files are considered to be the same as related files).
2. As per Applicant's argument that the examiner's conclusion of obviousness is based upon improper hindsight reasoning, it must be recognized that any judgment on obviousness is in a sense necessarily a reconstruction based upon hindsight reasoning. But so long as it takes into account only knowledge which was within the level of

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ordinary skill at the time the claimed invention was made, and does not include knowledge gleaned only from the applicant's disclosure, such a reconstruction is proper. See *In re McLaughlin*, 443 F.2d 1392, 170 USPQ 209 (CCPA 1971).

Conclusion

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Russell S. Glass whose telephone number is 571-272-3132. The examiner can normally be reached on M-F 8-5.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on 571-272-6776. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

RSG
5/2/2007



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5/11/07